

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES**



POLICY	
Department on Disability Services	Subject: Direct Support Training
Responsible Program or Office: Department on Disability Services (DDS) Training Institute	Policy Number: 2013-DDS-TRAINING-POL003
Date of Approval by the Director: April 24, 2013	Number of Pages: 6
Effective Date: April 30, 2013	Expiration Date, if Any: N/A
Supersedes Policy (Dated): Direct Support Training policy dated February 15, 2010.	
Cross References, Related Policies and Procedures, and Related Documents: Direct Support Professional Training procedure; DSP Training Structure Requirements; Employee Orientation Objectives and Competencies, Core Curriculum Training and Competencies; Incident Management Enforcement Unit policy and procedures, Human Rights policy, Behavior Support policy; Behavior Support Plan procedure;	

All underlined words/definitions can be found in the Definitions Appendix.

1. PURPOSE

The purpose of this policy is to establish the standards and guidelines by which the Department on Disability Services ("DDS"), Developmental Disabilities Administration ("DDA"), will mandate (and evaluate) all DDA providers perform on-going competency and value-based training to direct support professionals in a manner consistent with the requirements set forth in this policy.

2. APPLICABILITY

This policy applies to all direct support professionals ("DSPs") employed by DDA or Department of Health Care Finance ("DHCF") providers, subcontractors, vendors, consultants, volunteers, and governmental agencies that provide services and supports on behalf of individuals with intellectual disabilities receiving services as part of the DDA Service Delivery System funded by DDA or DHCF.

3. AUTHORITY

The authority for this policy is established in the Department on Disability Services as set forth in D.C. Law 16-264, the "Department on Disability Services Establishment Act of 2006," effective March 14, 2007 (D.C. Official Code § 7-761.01 *et seq.*); and D.C. Law 2-137, the "Citizens with Intellectual Disabilities Constitutional Rights and Dignity Act of 1978," effective March 3, 1979 (D.C. Official Code § 7-1301.01 *et seq.*).

4. POLICY

It is the policy of DDS to ensure all individuals receiving services from the DDA service system have access to and receive quality supports, services, and health care. All DSPs must receive training that will equip them with key knowledge, skills, and abilities. DSPs must receive initial and on-going competency based training in the following (but not limited to) valued outcomes: Rights and Dignity, Choice and Decision-Making, Health and Wellness, Safety and Security, Community Inclusion, Relationships, Satisfaction, and Service Delivery.

5. RESPONSIBILITY

The responsibility for this policy is vested in the Director, Department on Disability Services. Implementation for this policy is the responsibility of the Deputy Director, Developmental Disabilities Administration.

6. STANDARDS

The following are the standards by which DDS will evaluate compliance with this policy:

A. Training Delivery and Content

1. Individuals receiving supports and services from DDA shall receive services from competent and qualified staff.
2. DSPs shall demonstrate competency in basic writing and communication skills by completing a written and verbal assessment to verify their required abilities to communicate in English.
3. DSPs shall receive competency based training that provides them with a working understanding of the field of developmental disabilities, its history, current values, best practices and the role of DSPs in an individual's life.
4. DSPs shall complete competency-based training requirements in accordance with the guidelines and information described in the Individual Support Plan ("ISP") of each person served.
5. DSPs shall complete DDS Incident Management and Enforcement ("IMEU") training in accordance with the District of Columbia (DC) requirements for incident reporting.
6. DSPs shall complete training in universal precautions and infection control on an annual basis. The training materials shall meet Occupational Safety and Health Administration ("OSHA") requirements.
7. DSPs that may be exposed to hazardous chemicals shall complete relevant training in accordance with OSHA requirements.
8. DSPs shall maintain certification in First Aid and Cardiopulmonary

Resuscitation (“CPR”).

9. DSPs shall complete training in fire and vehicle safety.
10. DSPs shall complete training in Health Insurance Portability and Accountability Act (“HIPAA”) and follow guidelines to maintain confidentiality.
11. DSPs shall be certified in DDS-approved behavioral intervention procedures (e.g., Mandt, CPI, or Positive Behavior Strategies) before using manual restraint techniques. Staff members providing direct support shall maintain annual certification in DDS-approved behavioral intervention procedures if the person he/she supports has a behavior support plan that includes the use of crisis intervention and/or prevention techniques.
12. DSPs administering medication (or Trained Medication Employees (“TME”)) shall complete and maintain certification in a DDS-approved medication administration course in addition to supervision by a registered nurse licensed in the jurisdiction where the service is being delivered.
13. DSPs that work in homes certified as Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) must also maintain all training requirements consistent with all DC and federal laws and regulations.
14. Licensed professionals must be trained in the DDS Human Rights and Incident Reporting/Management modules as well as complete the competency verification process passing with score of 80% or higher for each policy.
15. Any person delivering services under the Home and Community Based Services (“HCBS”) waiver program must adhere to the training requirements consistent with DC rules governing the HCBS/IDD waiver program.
16. In addition to the applicable requirements described in policy statements 1-15 (above), DSPs shall complete the four-tiered DDS training standards as follows:
 - a. All DSPs shall complete the Employee Orientation Training before working with or in the residence of an individual supported by the DDA service system. DSPs that have not completed the Employee Orientation training may not work with or in the residence individuals receiving supports with the DDA service system.
 - b. DSPs shall complete the Specialized In-Service Training based upon the needs noted in the ISP of each person receiving services. This in-service training is conducted while the employee shadows an experienced DSP who is currently providing the services noted in the ISP. The Specialized In-Service Training shall continue as changes occur to the individual’s ISP, Health Care Management Plan (“HCMP”) and/or Behavior Support Plan (“BSP”). This in-service training may be captured through regularly scheduled training as well as implementation of on-the-job training tools.
 - c. DSPs shall complete the Core Training within 180 days of hire. This training provides a base level of knowledge for the DSP.
 - d. All DSPs shall complete twenty (20) hours of Enhanced Training annually,

as well as meet renewal requirements of critical Health and Wellness certified programs (e.g. CPR must be renewed annually; First Aid must be renewed every three (3) years). This training provides the experienced professional with the opportunity to refresh their knowledge and learn current best practices utilized within the profession. All newly hired DSPs shall complete twenty (20) hours of Enhanced Training by the second year of employment and annually thereafter based upon their anniversary date of hire.

B. Training Record and Approval

1. Each DSP must have a complete training record which includes the completion date and verification score for each training requirement prior to working alone at a direct service location.
2. DSPs providing services on a temporary or interim basis shall comply with the training requirements of the staff for which they are replacing.
3. Any DSP, working for a DDA Provider outside of the geographical area of DC that provides direct support to a person served by DDS must receive all of the required training outlined in this policy.
4. DSPs must achieve a score of 80% or better during the written competency verification process.
5. All DDA providers' curriculum or training modules shall be approved by the DDS Training Institute or its designee in order for staff to receive credit for meeting the training requirement. While the curriculum is being reviewed and/or approved, the provider must use DDS competency tests and curriculum.
6. DDA providers or designees shall agree to and adhere to the training approval guidelines provided by the DDS Training Institute.
7. DDA providers shall submit to the DDS Training Institute the names, hire dates, and position titles of all professional, technical, direct support, or related staff that provide services to individuals who receive supports through DDS. This information must be submitted using approved forms and processes within ten (10) business days of the date of hire.
8. DDA providers shall submit information to the DDS Training Institute regarding personnel changes (e.g., when a staff member leaves the agency, changes his/her name or receives a promotion) within ten (10) business days, using approved forms/processes.

C. Training Compliance

1. DDA providers must train all full-time, part-time, contractor, and volunteer staff as set forth in this policy.
2. DDA providers that do not comply with the requirements set forth in this policy will be subject to sanctions. Provider non-compliance is established

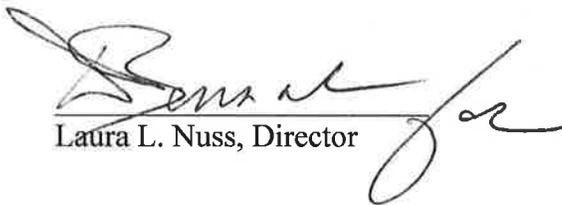
in four levels and may include (but is not limited to):

- a. LEVEL 1:
 - i. Training records are not submitted in compliance with stated DDA deadlines.
 - ii. Quality of training records is inconsistent with the requirements stated in the policy.
 - iii. Training records do not include all elements required in the policy
 - iv. 75-99% of the staff is trained and has passed the competency verification process (score of 80% or better).
 - b. LEVEL 2:
 - i. Late response or missed deadline within an established Corrective Action Plan.
 - ii. On-site training records are found incomplete for each staff member and are not maintained on-site.
 - iii. Lack of timely response to a notification through the Quality Management Division (QMD) Issue Resolution System regarding the quality of training or lack of necessary training for provider staff.
 - iv. 50-74% of the staff is trained and has passed the competency verification process (score of 80% or better).
 - c. LEVEL 3:
 - i. 100% non-compliance with this policy
 - ii. Lack of provider training policy and procedures noting implementation of this policy.
 - iii. Training records submitted to DDS Training Institute misrepresented the actual documentation of the training dates and competency verification process.
 - iv. 25-49% of the staff is trained and has passed the competency verification process (score of 80% or better).
 - d. LEVEL 4:
 - i. 100% non-compliance with this policy.
 - ii. Training records submitted to DDS Training Institute misrepresented the actual documentation of the training dates and competency verification process.
 - iii. 0-24% of the staff is trained and has passed the competency verification process (score of 80% or better).
3. All provider violations of non-compliance are reviewed by a panel of DDA management and recommendations are submitted to the DDA Deputy Director for issuance.
 4. The DDA Deputy Director (or designee) will issue sanctions (via memoranda) for training violations listed below(including but not limited to):
 - a. LEVEL 1: Within five (5) business days of receipt of the training sanction memorandum, the provider must submit to both the DDA Provider Resource Management Coordinator and DDS Training Institute a Corrective Action Plan with stringent deadlines to train 100% of their staff.

- b. LEVEL 2:
 - i. Level 1 sanction; and
 - ii. DDA will suspend all referrals and admissions until 100% of provider staff are trained; and/or
 - iii. DDA will post notification of non-compliance and lack of quality trained staff on the DDS website; and/or
 - iv. DDA will notify individuals, families, guardians, attorneys, advocates, Quality Trust, and Evans Parties of non-compliance and lack of quality trained staff; and/or
 - v. DDA will place provider agency on enhanced monitoring.

- c. LEVEL 3:
 - i. DDA will close provider location where staff are not 100% trained and notify families of transition; and/or
 - ii. DDA will collaborate and transition management oversight to a different provider
 - iii. DDA will make recommendation to terminate the provider's DDA Certification.
 - iv. DDA will make recommendation to terminate the provider's license through the DC Health Regulation and Licensing Administration (HRLA).

- d. LEVEL 4: DDA will make recommendation to terminate the provider's Medicaid Provider Agreement through the Department of Health Care Finance.



Laura L. Nuss, Director

4/24/2013
Approval Date